

Delaware Division of Fish and Wildlife



Charter Boat or Head Boat License Application

This is an application for a:

- ☐ Resident Head Boat\$300.00
☐ Non-Resident Head Boat\$600.00
☐ Resident Charter Boat\$150.00
☐ Non-Resident Charter Boat\$300.00

Vessel Owner Last Name _____

Vessel Owner First Name _____

Vessel Owner Middle Initial ____

Vessel Owner Address _____

Vessel Owner Address2 _____

Vessel Owner City _____

Vessel Owner State _____

Vessel Owner Zipcode _____

Vessel Owner Phone Number _____

Vessel Owner Drivers License Number _____ **Must attach copy**

Vessel Owner Social Security Number _____ - _____ - _____

Vessel Owner Date of Birth _____

Company Name (if applicable) _____

Boat Registration or Documentation Number _____ **Must attach copy**

Vessel Owner EI Number (if applicable) _____

Boat Name _____ Boat Length _____ Boat Capacity _____

Home Port or Area of Operation _____

Signature of Owner

Amount Enclosed
(Check Payable to Division of Fish and Wildlife)

If you wish to pay by Credit Cards, please circle appropriate card type (Visa, MasterCard, or Discover)

Card Number _____ 3-digit card code _____ Exp. Date _____

Signature _____ Date: _____

Mail To: Candace Dunning
Division of Fish and Wildlife
89 Kings Highway
Dover, DE 19901

Questions? (302) 739-9918

email To: DFWreclic@state.de.us
Fax To: 302-739-6157 call when faxing

If **Primary** operator is different from vessel owner, complete the following:

Operator 1 Last Name _____

Operator 1 First Name _____

Operator 1 Address _____

Operator 1 Address2 _____

Operator1 City _____

Operator 1 State _____

Operator 1 Zipcode _____

Operator1 Phone Number _____

Operator 2 Last Name _____

Operator 2 First Name _____

Operator 2 Address _____

Operator 2 Address2 _____

Operator 2 City _____

Operator 2 State _____

Operator 2 Zipcode _____

Operator 2 Phone Number _____

Operator 3 Last Name _____

Operator 3 First Name _____

Operator 3 Address _____

Operator 3 Address2 _____

Operator 3 City _____

Operator 3 State _____

Operator 3 Zipcode _____

Operator 3 Phone Number _____

Operator 4 Last Name _____

Operator 4 First Name _____

Operator 4 Address _____

Operator 4 Address2 _____

Operator4 City _____

Operator 4 State _____

Operator 4 Zipcode _____

Operator 4 Phone Number _____

Operator 5 Last Name _____

Operator 5 First Name _____

Operator 5 Address _____

Operator 5 Address2 _____

Operator 5 City _____

Operator 5 State _____

Operator 5 Zipcode _____

Operator 5 Phone Number _____

Operator 6 Last Name _____

Operator 6 First Name _____

Operator 6 Address _____

Operator 6 Address2 _____

Operator 6 City _____

Operator 6 State _____

Operator 6 Zipcode _____

Operator 6 Phone Number _____